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ABSTRACT

This set of briefs discuss state public policy and implications as they pertain to children in Georgia. The three briefs each address a single topic. The first, on benefits of child care for low-income children in Georgia, advocates implementation of the Georgia Early Learning Initiative (GELI) and details the program. The second brief, on the child care needs of Georgia's working mothers, provides information from focus groups on mothers' experiences with child care, the impact of low-quality care, and the potential impact of child care subsidies. The third brief compares Georgia child care indicators to those in other Southeastern U.S. states. (KB)

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Child Policy Briefs, 2002.

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Child Policy Brief

Child Care: Benefits for Low-Income Children

Issue

In 2001, the Georgia Legislature approved Governor Barnes' proposal for the first phase of the Georgia Early Learning Initiative (GELI). What impact is this program likely to have upon outcomes for low-income children, and should GELI be expanded?

Recommendation

For educational improvements that last a lifetime, implement the Georgia Early Learning Initiative statewide and ensure that every low-income child age zero to 3 has access to high-quality child care.

Early Childhood Education in Georgia

The goal of the Georgia Early Learning Initiative is "to maximize the number of children who enter school truly ready to learn and succeed by making lasting, systemic improvements in the provision of preschool care and educational services." During fiscal year 2002, GELI has introduced:

- A salary supplement program
- Scholarship assistance for child care workers pursuing educational programs
- A "tiered reimbursement" system to reward high-quality child care providers in five pilot counties
- Training and technical assistance for providers in those counties.

The interventions are intended to improve services for the population of children ages zero to 3 in family-, group- and center-based care. Similar programs have been established in North Carolina, Alabama and Florida.

There is a clear and convincing need for improvements to Georgia's child care system. Half of all preschool-age children in Georgia, 285,000 of the state's 570,000 children under age 5, are cared for by paid child care providers; while teacher-to-child ratios are substandard and teacher training requirements are minimal. Only 8% of Georgia's child care facilities have been accredited by any national agencies.

Significant state, federal and private resources will be spent upon GELI, whose total budget exceeds $6 million. While the public is becoming increasingly aware of the high cost of quality child care, uncertainty remains about expected benefits from these programs. Families who calculate whether to have a parent stay at home versus remain in the work force are not always certain how these decisions will affect their child's well-being. The lowest-income families may not have a choice about whether to work, but still make complex decisions about what type of care to pay for and how much care they can afford.

Does High-Quality Child Care Improve Outcomes for Kids?

We recently reviewed expected benefits of GELI from the perspective of four important high-quality early childhood educational programs; the Carolina Abecedarian project, the Chicago Longitudinal Study, the High/Scope Perry study and the federal Head Start program. Children who enrolled in these model studies were followed through adulthood to measure benefits of the early childhood intervention. The studies found strong positive associations between high-quality child care and high school graduation, and significant reductions in rates of remedial education, grade retention, juvenile delinquency and teen pregnancy. They also found substantial, statistically significant evidence to support the claim that benefits received from high-quality early learning programs are long term, and that they can greatly reduce the adverse effects of poverty and poor socioeconomic background. Benefits to academic performance, in particular, remain strong over time.

GELI 2000: Best Case Scenario, Impact on Educational Outcomes

	Grade Retention		Remedial Education		High School Graduation	
Child Care Program	Number Affected	Percent Change	Number Affected	Percent Change	Number Affected	Percent Change
Head Start	Mixed		Not Measured		No Effect	
Chicago LS	450	32%	1,430	32%	4,169	28%
High/ Scope	No Effect		2,201	50%	6,687	44%
Carolina ABCD	606	43%	2,056	47%	Not Measured	

Assumes 100% of children up to 185% of Federal Poverty Level receive at least one year of high-quality child care.

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Benefits for Low-Income Children

Findings

We applied the performance of enrollees in the four model studies to Georgia's child population and found that indeed, significant benefits can be expected from a similar intervention in Georgia. The table on the previous page highlights findings for educational outcomes.

The model studies used differing measures of juvenile delinquency, so it was not possible to create meaningful quantitative projections for this outcome in Georgia. However, three of the four studies did evaluate delinquent behavior of program participants, and their research showed a positive relationship between involvement in early learning programs and acceptable social behavior in the teenage years. The High/Scope Perry program found 58% fewer arrests for individuals who participated in the preschool program versus those who did not participate. The Chicago Longitudinal Study enrollees had a significantly lower rate of arrests (16.9%) when compared to the control group (25.1%). When Head Start participants were compared to their siblings who did not enroll in Head Start, the Head Start enrollees were found to have significantly less criminal activity than children who attended other preschools.

Only the High/Scope Perry program measured an effect on teen pregnancy, but this study demonstrated a significant relationship, with 42% fewer teen births among program participants. Other notable effects that can be expected on the basis of all the studies are greater lifetime earnings and lower unemployment rates for children who receive high-quality child care, due to the increased number of high school graduates. Also, there are benefits to parents of enrollees, many of whom demonstrated improved parenting skills, better employment outcomes and higher educational status as a result of their child's participation in the child care program.

Model Child Care Studies

It is important to note the number of characteristics that vary among these high-quality child care providers. Programs need not be identical in order to offer the highest level of care.

- Carolina Abecedarian Project (NC): children were enrolled between age 6 weeks and 3 months, and remained in the program for five to eight years. They received full year, full day center-based care with supporting materials for parents, and some medical and social services were provided.
- Chicago Child Parent Center (IL): children were 3 to 4 years old when enrolled, and participated for two to six years. They received a half-day, nine-month program with emphasis on parental involvement, and some medical and social services were provided.
- Head Start (nationwide): children were 3 to 4 years old when enrolled, and participated for one to three years. They received a half-day, nine-month program with emphasis on parental involvement, and some medical and social services were provided.
- High/Scope Perry (MI): children were 3 years old when enrolled, participated for two years and received daily center-based classes. Families received a weekly home visit for 30 weeks of the year.

Caveats

Our research defines "low-income" as 185% of the Federal Poverty Level, and assumes that 100% of low-income children in Georgia receive at least one full year of child care in a home or facility that maintains all national accreditation standards. Furthermore, we assume that full implementation of GELI would achieve high-quality care commensurate to the intensive interventions of the four model studies. Because most of the model programs offered supplemental services including medical care and parenting instruction, it is likely that these services would have to be added to the GELI plan in order to achieve similar effects in Georgia.

Conclusion

The effects of high-quality early childhood care and education are strong and long lasting. High-quality child care, like that proposed in the GELI plan, can improve high school graduation rates and reduce juvenile delinquency among low-income Georgia children. If fully implemented, GELI will reduce the need for remedial education as low-income children move on to school, and reduce the number of children retained in grade. While even the highest quality early education programs are insufficient to offset all of the negative effects of poverty, it is clear that measurable success can be achieved in preparing children for school and later life. If the state, providers, teachers and families ensure that this important new program is implemented according to plan, and if low-income children in need are fully enrolled, the Georgia Early Learning Initiative is poised to have a significant positive impact on the lives of children at risk.

This policy brief was adapted from the article "Benefits Associated with Improved Child Care in Georgia" by Laura Wheeler and Lauren Watts, Georgia Health Policy Center, September 2001. For more information, read the full report at: www.gsu.edu/~www.ghp/children Publications gachildcareben.pdf

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Child Policy Brief

Child Care: Needs of Working Mothers

Issue

Little is known about the trade-offs low-income working mothers face when selecting child care for their children. High-quality child care is expensive, and beyond the reach of most low-income families. We conducted focus groups with mothers on waiting lists for state child care subsidies to learn their preferences and concerns about their current child care arrangements. We asked them whether they plan to change these arrangements if they receive a child care subsidy.

Recommendation

Child care subsidies are likely to have a significant impact on low-income working mothers' ability to achieve independence through education and better jobs. If low-income mothers receive adequate child care assistance, they will use it to place their child in healthier, safer environments that support educational objectives. The amount of the subsidy is an important factor in determining the degree to which mothers would change their children's arrangements. A subsidy representing 75% of a low-income family's child care cost is likely to have a very strong positive impact on that family's future.

Talking with Low-Income Mothers

Two focus groups were held: one in Atlanta and one in Columbus. Participants were randomly recruited from child care subsidy waiting lists provided by local offices of the Department of Children and Family Services. Eight mothers attended from DeKalb and Fulton counties, and 13 mothers attended from Muscogee County, for a total of 21 participants. Participants' children ranged in age from two weeks to 13 years. Eighteen attendees were African-American and three were white. Over half of the mothers worked full- or part-time, nearly 25% attended school and work, or school only, and the remaining mothers were students taking maternity leave. Participants were asked a range of questions regarding their attitudes about and experiences with child care providers. Primary discussion topics were:

- What mothers look for in child care providers, and the definition of "high-quality child care"
- Current child care arrangements, and the impact that these arrangements have on mothers and their children
- Impact that a child care subsidy would have on participants and their families

"Knowing that he is safe when I'm away from him and that he feels comfortable will make my day go well."

Looking for Child Care

Mothers told us that they want their children to be comfortable, safe, secure and stimulated, both mentally and socially, while they are away at work or school. These values clearly equal those of mothers in more advantageous socio-economic situations. Participants spoke of seeking out caregivers who are nurturing, patient, experienced and dedicated, and they highlighted the importance of certification and training.

The Columbus mother who said, "I want my child to go somewhere to learn," summarized the feelings of all participants. These mothers do not want someone to merely babysit their children. Rather, they want a well-planned daily curriculum that provides a variety of learning experiences, entertainment, recreational play and rest periods. Learning to share and playing well with others is viewed as an important aspect of their children's development. They also care about good communication from teachers and value an open-door policy. An Atlanta mother explained, "Sometimes, I will go and sit in the classroom with my child to see how he interacts with the other children, what he's being taught, how the teacher interacts with him and how she disciplines him. That's important to me."

"Why should you pay for something that is not even worth paying for? But we have to utilize it because that's all we have."

Working Mothers

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Experiences with Child Care

Participants in the groups expressed frustration at not being able to afford the care they would like. They reported paying between $75 and $170 per child per week for care in a center or family home. In some cases, grandparents assisted in paying for care. Payments to relatives ranged from zero to $40 per week. The mothers described many bad experiences with current or past child care. The majority of these cases, whether in a child care center, family child care home or with relatives, dealt with a child's injury. One mother remembered, "I went to pick up my son, and he was seven months old, and he had scratches on his face. He was seven months old and scratches on his face! Nobody called to let me know when I was at work."

Another mother said, "When I had my baby, she was born three months early, so she had breathing problems, and they had a little machine that monitored how she breathes. One day (her grandmother) got tired of the machine because every time my baby coughed it would go off...So, she took my baby off the machine and my baby stopped breathing...They called me home from work to get my baby and take her to the hospital." Other negative experiences involved children left with wet diapers, with dirty faces or hands, and an inability to get in touch with day care owners and teachers to ask about children. As a result of these experiences, participants believe day care centers should be better regulated and monitored for abuses. They would like results of inspections to be better publicized so that parents could have access to information to make decisions about child care.

Equally important, the women told of negative impacts low-cost child care had on their employment and living situations:

- Two women accepted stressful nighttime work schedules so relatives could care for the children while they sleep.
- One participant had to quit her job because day care was too expensive.
- One mother keeps a job she does not like, that does not pay well and offers no advancement because she is able to take her 2-year-old daughter to work with her.
- Many women work irregular hours in less-stable jobs that they schedule around the availability of child care.
- One mother would like to keep her child in day care all day, whereas at present, she can only afford a half day of care and depends on an elderly great-grandmother to keep her daughter in the afternoon.

Mothers told us that they experience a high degree of stress due to worries about current child care arrangements. One mother is deeply concerned because she must leave her children with her wheelchair-bound mother, and she wonders what would happen if her older daughter wandered out of the front yard or the baby were choking. An Atlanta mother worries because her child's day care center is located at a busy intersection with strangers coming and going all the time. She has heard stories about "crazy things" happening at the apartment complex across the street from the center. A young Columbus mother who relies on her high school day care does not think that the staff could adequately evacuate the children in case of a fire or other emergency. Participants frankly stated that they have visited many centers and homes before making a decision but in most instances could not afford the facility they liked best.

"I would be in school and working (if I received a subsidy) because I would pay the other part...Then I could get my degree. It would be a perfect world."

Impact of a Child Care Subsidy

Focus group participants grew animated when discussing how their lives would change if they received a significant subsidy to help pay for child care. The subsidy is seen not only as a means for improving life for their children and themselves, but also as a means of being more independent. For most, it would mean placing their children in a higher-quality day care center that would offer a better environment and educational opportunities. "I could put them in a day care that I like, the one I saw that had the computer room, that had the curriculum I liked and that cared about my child and his well being," said one. Many, especially those with infants who have delayed their return to school, would resume degree programs at college sooner.

Mothers clearly stated that they would not substitute subsidy money for what they are currently paying out of pocket, but would continue paying the same amount and use the subsidy to supplement their day care budget to improve their children's situations. For mothers working nights, the subsidy would enable them to seek day jobs and ultimately provide a more stable home environment. Mothers whose children are cared for by family members said they too would change to a more formal day care setting because they perceived numerous advantages. Most importantly, mothers stated that the subsidy would help them take better care of their children. As one Columbus mother put it, "You don't want to have to depend on other people because that's not their job. This is my child. I know I brought her into the world, and I'm doing what I can to provide for her."

This policy brief was adapted from the article, "Working Mothers Speak: Report on Child Care Focus Groups" by Georgia Health Decisions in conjunction with the Georgia Health Policy Center, August 2001. For more information, read the full report at: www.gsu.edu/~wwwghp/children/Publications/ccfocus.pdf

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Child Policy Brief

Child Care: Georgia and the Region

Issue

Georgia leads the southeastern region in population growth and economic development, but lags significantly behind other states in supporting child care for families whose children are at highest risk of poor outcomes, and in setting standards that could improve the quality of child care services.

Recommendation

Much can be done to strengthen the child care system in Georgia. Regulators need to review and update licensing standards to reflect current knowledge about the conditions required to achieve high-quality care. Georgia should lower the child-to-staff ratios of licensed providers and raise requirements for child care worker training. In addition to serving families leaving welfare, Georgia should prioritize all working poor families for child care subsidies, eliminate or minimize co-payments and draw down all available federal Child Care and Development Funds to ensure that every child eligible for a child care subsidy receives it.

Comparing Georgia to its Neighbors

We recently performed an analysis comparing Georgia to other southeastern states across a range of demographic and child care system indicators. No single measure can represent the complicated array of factors that influence child care programs, and the comparisons generated through this analysis serve only as estimates for the impact of the child care environment on young children. However, our findings identify key areas of concern for policy makers and highlight measures that can serve as benchmarks for Georgia over time. "Comparison states" for this report included Alabama, Arkansas, Florida, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee and Virginia.

Population

Georgia is a rapidly growing state with a larger population of young children and working mothers, and more rural residents, than its neighbors. The 2000 Census shows that Georgia's population grew at the greatest rate, 26.4%, of any southeastern state.

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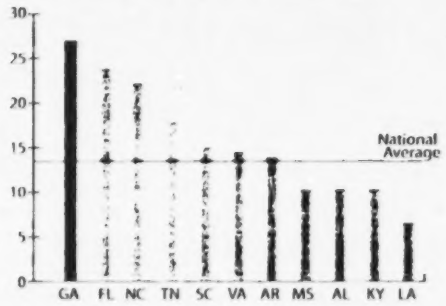
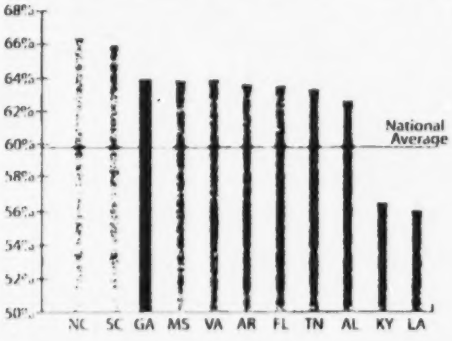
Change in Population, 1990 – 2000



Georgia exceeds the national average for percentage of women in the labor force who have children younger than age 6, and ranks third in the Southeast.

Women in the Labor Force with Children Under Age 6



Cost

The cost of child care is often compared with public college tuition to provide an indication of relative state support for different forms of education. Families generally must pay for child care earlier in their careers, during a period of their lives when their income is more likely to be low, and yet there are few public supports to assist them.

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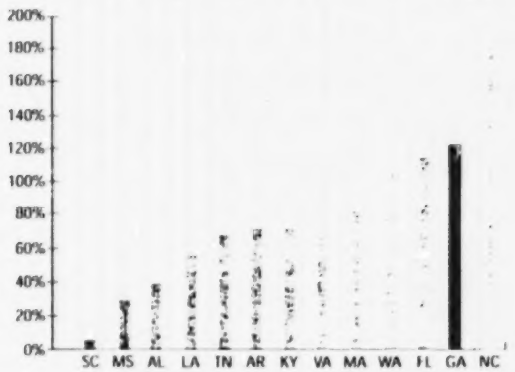
Meanwhile, college students, whose parents have had time to save and increase income through established work histories, find state-supported universities and publicly-funded loans and scholarships. For every state in our study, child care center costs are greater than state colleges, and Georgia still exceeds all the comparison states but one in the degree to which child care costs outpace public college tuition.

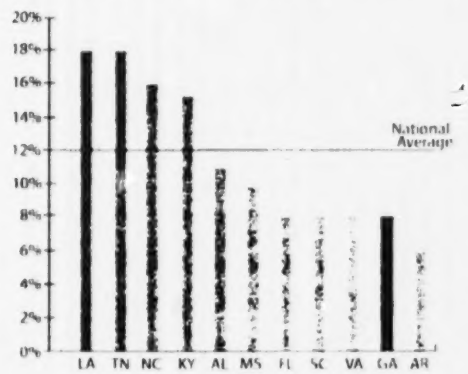
Percent by which Child Care Cost Exceeds Public College



Tuition Assistance for Low-Income Children

Georgia, like the majority of states, sets its annual income eligibility standard for child care subsidies considerably lower than the amount of income allowed by federal authorities. Georgia has average performance for the region in the number of low-income families that it makes eligible for child care subsidies, but poorer than average performance on actually providing subsidy assistance.

Percent of Low-Income Children Served through Subsidized Child Care



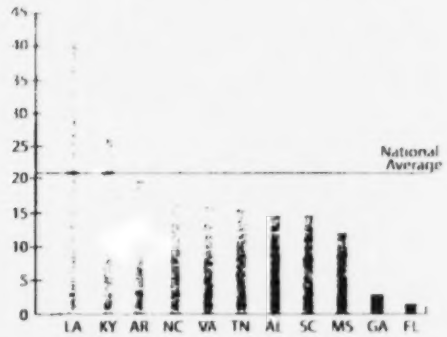
Quality

One of the most common and important predictors of high-quality child care is a low child-to-staff ratio in centers and homes. The state's child care licensing standards allow many more children per staff member than are recommended by the National Association for the Education of Young Children (NAEYC). For 9-month-olds, Georgia allows six infants per caregiver, compared to the national quality standard of four per caregiver, which places Georgia in the worst-performing group among southeastern states. For 2-year-olds, Georgia allows 10 per caregiver, compared to the national quality standard of seven. Georgia ranks in the middle of the comparison group for this measure.

Availability

Licensed child care facilities, both centers and group homes, are more difficult to find in Georgia than other southeastern states. There are only 72 facilities for every 1,000 children in our state, making Georgia second to last in the Southeast.

Licensed Facilities Per 1,000 Children Under Age 5



Conclusion

In almost every area, there is cause for concern about the condition of Georgia's child care system. While Georgia is a southeastern leader in many areas, its performance is average or worse on most measures of child care. Child care has an important impact on both children, who thrive when they receive high-quality services, and their parents, who are able to work and provide for their families when child care needs are met. Through welfare reforms, many states have found that child care is an integral part of promoting sustained independence and employment. While the benefits are clear, child care remains an often overlooked public policy issue in Georgia compared to other southeastern states. Much work remains to be done by government, providers, advocates and families to secure a stable, high-quality child care system that will ensure child well-being and support working families over the long term.

This policy brief was adapted from the article, "Regional Child Care Trends: Comparing Georgia to its Neighbors" by Lauren Watts, Malina Monnico, Lisa Beck and Jennifer Edwards, Georgia Health Policy Center, September 2001. For more information, read the full report at: www.gsu.edu/~wwwghp/children/Publications/statesrpt.pdf

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